## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
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COVER PAGE

STATE OF CALIFORNIA

Please type or print in ink.		2910 MR	-6 AM O. L.O.
NAME OF FILER (LAST)	(FIRST)		
Allen	Dante	AUMIN	ISTR AQUIOTIN
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)		-	
State Treasurers Office		V David	· · · · · · · · · · · · · · · · · · ·
Division, Board, Department, District, if applicable	1	Your Position	
CalABLE		Executive Director	
► If filing for multiple positions, list below or on a	an attachment. (Do not use	acronyms)	
Agonov	Position:		
Agency.		T OOKIOH,	
2. Jurisdiction of Office (Check at least of	one box)		
State     ■ The state       ■ The state       ■ The state       ■ The state       ■ The state       ■ The state      ■ The state        ■ The state        ■ T		☐ Judge or Court Commissioner (State	ewide Jurisdiction)
Multi-County		County of	
☐ City of		☐ Other	
3. Type of Statement (Check at least one	box)		
Annual: The period covered is January 1, 2 December 31, 2017.	?017, through	Leaving Office: Date Left(Check one)	<u></u>
The period covered is/ December 31, 2017.	/, through	<ul> <li>The period covered is January leaving office.</li> </ul>	1, 2017, through the date of
★ Assuming Office: Date assumed	08 , 2018	<ul><li>The period covered is/_</li><li>the date of leaving office.</li></ul>	, through
Candidate: Date of Election	and office sought, if	f different than Part 1:	
4. Schedule Summary (must complete	te) ► Total number o	of pages including this cover pag	e:
Schedules attached			
Schedule A-1 - Investments - schedule	attached	Schedule C - Income, Loans, & Business	Positions – schedule attached
Schedule A-2 - Investments – schedule a	attached	Schedule D - Income - Gifts - schedule a	ttached
Schedule B - Real Property - schedule a	attached	Schedule E - Income - Gifts - Travel Pay	ments - schedule attached
-or-			
None - No reportable interests on a	any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docume	CITY entl	STATE	ZIP CODE
(Basilless of Agency Address Accommended - Lable Became	ny		
DAYTIME TELEPHONE NUMBER	-	E-MAIL ADDRESS	
( 916 ) 653-4046		dante.allen@treasurer.ca.gov	
I have used all reasonable diligence in preparing herein and in any attached schedules is true and			wledge the information contained
I certify under penalty of perjury under the la	ws of the State of California	a that the foregoing is true and correct.	
Date Signed February 16, 2018	Sic.	inature Alle	(X/D)
(month, day, year)		(File the originally signed statement	at-with-your filing official.)